tation whatever. Most of the other methods tried have drawbacks. The silk prepared by this method does not give any trouble. Aside from transplanting the tendon one can sometimes make a stay or brace with silk from the periosteum of the leg through some of the bones in the foot. If we had the tibialis paralyzed one could put a silk stay from the tibia to the internal cuneiform bone, planting at both ends the suture in the periosteum. That serves to hold the foot in position and acts very well to prevent deformity. In all operations it is absolutely necessary to over-correct your deformity. This helps in several ways. We all know that many of these muscles are only partially paralyzed and weakened on account of the position of the foot. Over-correcting this allows new life to come back and that taken with transplantation helps it very well. With regard to the time of operation, as Dr. Watkins says, one year is the time to begin and that is pretty hard to determine. Certainly I and that is pretty hard to determine. Certainly I should not operate under one year after the onset of the paralysis. I am at present treating a case paralyzed 1½ years ago which is still improving and probably will improve for some time yet. When to operate is pretty hard to tell but certainly not under a year. Sometimes bone operations coupled with muscle implantation can be done to good advantage and I have known several instances good advantage and I have known several instances in which that works very nicely. Suppose there were calcaneous deformities, calf-muscles paralyzed, one can remove the astragalus and push the leg forward on the foot and give a good, solid founda-tion and one can get along without the need of a brace afterward. Another bone operation works out where the quadriceps is paralyzed and we want to transplant the biceps—and that is to do an osteotomy in the femur making a backward bend best above the knee and allow the patient to stand on the leg and this gives the transplanted muscles better chance to work.

Dr. R. L. Wilbur, closing: Dr. Hunkin's discussion has shown us that there are many cases of this disease constantly occurring. The principal object in bringing my paper before you was to emphasize the importance of early diagnosis for the protection of the individual and the community and to encourage early rest and proper care, in the hope that as time goes on the consequences of the disease may be avoided in the individual and the spread of it controlled in the community.

Dr. J. T. Watkins, closing: I presaged my paper by saying that it must necessarily be incomplete. Still I tried to get in all I could on this subject in the time allotted to me. The members of the Alameda County Medical Society will remember that I read a paper before them on infantile paralysis and not being limited for time I made the same contention that the doctor has as to the importance of protecting the joints during and after an attack of infantile paralysis. Lange has emphasized that. With regard to the manner of attaching the silk tendon, the point is to attach it in such a way that it will hold. The manner of attachment may vary with the individual. I have no objections, of course, to Dr. Hunkin's nautical knots. As to the best time to operate please note that I specifically said if you can control the conditions surrounding your patient one year after beginning a systematic protracted conservative treatment is the inside limit. I have not thus far had to undo anything I had done in an operative way. I do not think such an eventuality will arise if the operation plan is prepared properly. So far as silk ligaments are concerned I did not have time to speak at length of them in the abstract of my paper. You will find them considered somewhat fully in the published paper, however. It gives me pleasure to say that I thoroughly agree with the procedure of which Dr. Milton spoke.

SOCIETY REPORTS

CALIFORNIA ACADEMY OF MEDICINE.

The California Academy of Medicine held its regular meeting on Monday evening, September 23rd, in the rooms of the County Medical Society.

The following scientific program was given:
1. (A) A Suggestion in the Surgical Treatment of Tic Douloureux of the Inferior Dental Nerve.
(B) Treatment of Oblique Spiral Fractures of the

- Tibia. Charles G. Levison. Discussed by R. L. Wilbur, Sol. Hyman, S. J. Hunkin and C. G. Levison.
- Observations on the Anatomy of the New-Born. A. W. Meyer. Discussed by W. Ophuls, W. F. Schaller and A. W. Meyer.
 W. F. Schaller and Jean V. Cooke were elected

membership.

Refreshments were served at the close of the

NEVADA STATE SOCIETY.

The annual meeting of the Nevada State Medical The annual meeting of the Nevada State Medical Society closed with a banquet on the night of October 9th. The meeting was an unusually good and well attended one. The newly-elected officers are as follows: President, M. R. Walker; Vice-President, A. P. Lewis; Second Vice-President, P. J. Mangan; Secretary, M. A. Robison; Delegate to the A. M. A., B. F. Cunningham; Alternate, M. A. Robison Robison.

ORANGE COUNTY.

The meeting of the Orange County Medical Society for October was held at Santa Ana and the subject of Racial Betterment was the principal topic of discussion with strong resolutions on the proper control of marriage licenses as an outcome. A committee consisting of Drs. J. F. Doyle, H. A. Johnston and A. H. Domann was appointed to cooperate with other societies.

SAN JOAQUIN VALLEY SOCIETY.
The Thirty-third meeting of the San Joaquin Valley Medical Society was held at Merced, Octo-Valley Medical Society was held at Merced, October 8th, under the genial guidance of Dr. Hildreth, its President. The program was as follows: Personal Experiences with Bacterines, by W. W. Cross; Epidemic Poliomyelitis, by Philip King Brown; Continued Report on Gall Bladder Sections, by T. C. Rosson; Report of a Case of Splenectomy, by H. Kylberg; The Future Outlook for the Medical Profession as Affected by Legislation, by J. H. Parkinson. In the evening a banquet was tendered to all those in attendance by the physicians of Merced.

SANTA CRUZ COUNTY.

The September meeting of the Santa Cruz County Medical Society was held at the office of Dr. E. E. Porter at Watsonville and was largely attended. Matters of business interest, illegal practitioners, etc., were largely discussed.

SONOMA COUNTY.

The Sonoma County Medical Society held its meeting for October on the afternoon of the 10th at the State Hospital at Eldridge, where the meeting was in the nature of a clinical one, followed by refreshments and a social session.

BOOK REVIEWS

Elementary Bacteriological and Protozoology: the Microbiological Causes of the Infectious Diseases. By Herbert Fox., M. D., Director of the William Pepper Laboratory of Clinical Medicine in the University of Pennsylvania. 12mo, 237 pages, with 67 engravings and 5 colored plates. Cloth, \$1.75, net. Lea & Febiger, Philadelphia and New York, 1912.

As the author's preface states this is a work for